

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

OMB APPROVAL					
OMB Number:	3235-0076				
Expires: December 31, 1996					
Estimated average burden					
hours per response16.00					

SEC USE ONLY				
Prefix		Serial		
DA'	TE RECEIV	ED		

Series A-2 Convertible Preferred Filing Under (Check box(es) that	<u> </u>	☐ Section 4(6) ☐ ULOE
	_	El decilon 40) 🖸 Obob
Type of Filing: New Filing	A. BASIC IDENTIFICATION DATA	
1. Enter the information requeste		3
, , , , , , , , , , , , , , , , , , , 	is is an amendment and name has changed, and indica	ate change.)
Address of Executive Offices	(Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
374 Congress St.	Boston, MA 02210	(617) 357-4600
Address of Principal Business Op (if different from Executive Offic	erations (Number and Street, City, State, Zip Code) es)	Telephone Number (Including Area Code)
Brief Description of Business		JUL 0 7 2004
Retirement financial planning		DDAA
Type of Business Organization X corporation	limited partnership, already formed	other (please specify):
zz corporation	imited partnership, to be formed	UL 12
☐ business trust		

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

		A. BASIC IDENTI	FICATION DATA		
2. Enter the information re-	quested for the	following:			
Each promoter of the	issuer, if the is	ssuer has been organized	within the past five year	rs;	
 Each beneficial owner securities of the issuer 		wer to vote or dispose, o	r direct the vote or dispo	osition of, 10%	or more of a class of equity
Each executive officer	and director of	corporate issuers and of	corporate general and m	anaging partne	rs of partnership issuers; and
		of partnership issuers.			•
Check Box(es) that Apply:	☐ Promoter	⊠ Beneficial Owner	⊠ Executive Officer	⊠ Director	General and/or Managing Partner
Full Name (Last name first,	if individual)				
Bhatia, Sunil					
Business or Residence Addre	ss (Number a	and Street, City, State, 2	Lip Code)	· · · · · · · · · · · · · · · · · · ·	
374 Congress St., Boston, N	1A 02210				
Check Box(es) that Apply:	□ Promoter	⊠ Beneficial Owner	⊠ Executive Officer	⊠ Director	☐ General and/or Managing Partner
Full Name (Last name first,	if individual)	· · · · · · · · · · · · · · · · · · ·			
Nada, Sherif A.					
Business or Residence Addre	ss (Number i	and Street, City, State, 2	Lip Code)		
374 Congress St., Boston, N	ИА 02210				
Check Box(es) that Apply:	☐ Promoter	⊠ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first,	if individual)				
Taylor, Gavin					
Business or Residence Addre	ss (Number a	and Street, City, State, 2	Zip Code)		
59 Bonny Lane, North Ador	ver, MA 01845				
Check Box(es) that Apply:	☐ Promoter	⊠ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first,	if individual)		·		
Chafin, Jack					
Business or Residence Addre	ss (Number s	and Street, City, State, 2	Cip Codé)		
8 Libby Rd., Natick, MA 01	760		~		
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first,	if individual)				
Business or Residence Addre	ss (Number a	and Street, City, State, 2	Cip Code)		
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first,	if individual)				
Business or Residence Addre	ss (Number a	and Street, City, State, 2	Lip Code)		
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first,	if individual)			· · · · · · · · · · · · · · · · · · ·	
Business or Residence Addres	ss (Number a	nd Street, City, State, 2	(ip Code)		
(1	Use blank sheet	, or copy and use additi	onal copies of this sheet	, as necessary.)	

				B. II	VFORMA	HON ABO	OUT OFF	ERING					
1. Has	the issuer :	sold, or do	es the issu	ier intend	to sell, to	non-accre	lited inves	tors in this	offering?	·		Yes . ⊠	No
							o 2, if filir		_			_	_
2. Wha	t is the mi	nimum inv						-				. s N/A	4
2. What is the minimum investment that will be accepted from any individual?							Yes	No					
	r the inforr												
sion to be list t	or similar relisted is as the name of ealer, you	emuneration associated the broke	on for solic d person o er or dealer	citation of or agent of r. If more	purchasers a broker (than five (in connect or dealer re (5) persons	ion with sa gistered w to be liste	les of secu ith the SE d are asso	rities in the C and/or	e offering. with a state	If a perso e or states	ת i,	
Full Name	e (Last nan	ne first, if	individual)						 			
N/A													
	or Residence	e Address	(Number	and Street	, City, Sta	ite, Zip Co	ode)	· 					
Name of	Associated	Broker or	Dealer	·		-, -i,,		· · · · · · · · · · · · · · · · · · ·		·	·		
States in '	Which Pers	son Listed	Has Solic	ited or Int	ends to So	licit Purch	asers						
	"All State											□ All :	States
[AL]	[AK]	[AZ]	[AR]	[CA]	(CO)	(CT)	(DE)	[DC]	[FL]	[GA]	[HI]	[ID	
(IL)	(IN)	[1A]	[KS]	[KY]	[LA]	[ME]	(MD)	[MA]	[MI]	[MN]	[MS]	[MO	
[MT]	(NE)	[NV]	(NH)	[NJ]	[NM]	[NY]	[NC]	[ND]	(OH)	[OK]	[OR]	[PA	
[RI]	(SC)	[SD]	[TN]	[TX]	{UT}	[VT]	[VA]	[WA]	[WV]	[W1]	[WY]	{PR	}
	e (Last nar			·	City Sta	us. Zin Co	nde)					 ·	
Dusiness V	or Resident	ic Addiess	(ITAIIIDEI	and Sirect	, City, Ste	iie, 25p Ct	,uc,						
Name of	Associated	Broker or	Dealer										
States in	Which Per	son Listed	Has Solic	ited or Int	ends to Sc	olicit Puret	asers						
(Check	"All State	s" or ched									• • • • • • • •		
[AL]	{AK}	[AZ]	[AR]	{CA}	[CO]	[CT]	[DE]	[DC]	[FL]	{GA}	[H1]	[ID	
(IL] [MT]	[IN] [NE]	- (IA) [NV]	(KS J [NH]	(KY [NJ]	(LA] [NM]	(ME)	(MD) (NC)	(MA) [ND]	(MI] [OH]	[MN] [OK]	[MS] [OR]	(MO [PA	
[RI]	[SC]	{SD}	[TN]	[TX]	(UT)	(VT)	[VA]	[WA]	[WV]	[WI]	[WY]	[PR	
Full Nam	e (Last nar	ne sirst, is	individual	1)									
Business	or Residence	e Address	(Number	and Street	. City, Sta	ite, Zip Co	ode)						
			·				•						
Name of	Associated	Broker or	Dealer										
States in	Which Per	son Listed	Has Solic	ited or Int	ends to So	olicit Purch	nasers						
(Check	"All State	s" or chec	k individu	al States)								□ All	
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID	
[IL] [MT]	{ IN } [NE]	[[A] [NV]	[KS] [NH]	[KY] [NJ]	{LA [NM]	[ME] [NY]	[MD]	[MA] [ND]	[MI] [OH]	(MN) [OK]	[MS]	[MO [PA	
[RI]	(SC)	[SD]	[TN]	[XX]	[UT]	{VT}	[VA]	[WA]	[WV]	[WI]	[WY]	[PR	

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \square and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	\$. · s
	Equity.	\$ 360,500	s 360,500
	□ Common ⊠ Preferred		
	Convertible Securities (including warrants)	\$	_ \$
	Partnership Interests	\$	<u>.</u> \$
	Other (Specify)	S	<u> </u>
	Total	\$ 360,500	\$ 360,500
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors	4	\$ 360,500
	Non-accredited Investors		. s
	Total (for filings under Rule 504 only)		_ \$
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.	Type of	Dollar Amount
	Type of offering	Security	Sold
	Rule 505		_ S
	Regulation A		_ S
	Rule 504		<u> </u>
	Total	0	s 0
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees] S
	Printing and Engraving Costs		3 s
	Legal Fees		\$ 5,000.00
	Accounting Fees		s
	Engineering Fees		s
	Sales Commissions (specify finders' fees separately)		s
	Other Expenses (identify) Blue Sky Filing Fees		s 0
			• 5,000.00

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

Enter the difference between the aggregate of 1 and total expenses furnished in response to	fering price given in response to Part C -	Oue			
usted gross proceeds to the issuer."	o Part C - Question 4.a. This difference	is t	he		\$ 355,500
for each of the purposes shown. If the amount and check the box to the left of the estimate	ount for any purpose is not known, furn ate. The total of the payments listed must	ish : t equ	an ial e. Payments to Officers,		D
			Affiliates		Payments To Others
Salaries and fees		. 🗵	\$ 20,000	Ø	\$80,000
					S
		. –	V	. –	
offering that may be used in exchange for th	e assets or securities of another	. 🗅	s		s
Repayment of indebtedness		. 🗆	\$		\$
Working capital		. G	S	- XQ	\$ 255.000
Other (specify):		_ 🗆	S	. 0	\$
		- . 0	s		s
Column Totals	.,,,,,,,	. 🛭	\$20,000	. 🛭	\$335,000
Total Payments Listed (column totals added))	•	⊠ \$ <u>33</u>	5,500)
	D. FEDERAL SIGNATURE		·		
ng signature constitutes an undertaking by the fits staff, the information furnished by the i	issuer to furnish to the U.S. Securities a issuer to any non-accredited investor put	ind i rsuai	Exchange Commi nt_to paragraph (1551ON	, upon written re-
Print or Type)	Signature	7	Dat	e	
e. Inc.	1 Sul De	A.	J	11 y	1, 2004
	Title of Signer (Print or Type)				
Bhatia	President				
	I for each of the purposes shown. If the amonate and check the box to the left of the estimate and check the box to the left of the estimate adjusted gross proceeds to the issuer set fort. Salaries and fees Purchase of real estate Purchase, rental or leasing and installation of Construction or leasing of plant buildings and Acquisition of other businesses (including the offering that may be used in exchange for the issuer pursuant to a merger) Repayment of indebtedness Working capital Other (specify): Column Totals Total Payments Listed (column totals added the signature constitutes an undertaking by the fits staff, the information furnished by the	I for each of the purposes shown. If the amount for any purpose is not known, furnate and check the box to the left of the estimate. The total of the payments listed musuadjusted gross proceeds to the issuer set forth in response to Part C - Question 4.b. and purchase of real estate Purchase of real estate Purchase, rental or leasing and installation of machinery and equipment Construction or leasing of plant buildings and facilities Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger) Repayment of indebtedness Working capital Other (specify): Column Totals Total Payments Listed (column totals added) D. PEDERAL SIGNATURE Let has duly caused this notice to be signed by the undersigned duly authorized persong signature constitutes an undertaking by the issuer to furnish to the U.S. Securities af its staff, the information furnished by the issuer to any non-accredited investor purports of Signer (Print or Type) Figure (Print or Type) Signature Title of Signer (Print or Type)	I for each of the purposes shown. If the amount for any purpose is not known, furnish nate and check the box to the left of the estimate. The total of the payments listed must equadjusted gross proceeds to the issuer set forth in response to Part C - Question 4.b above adjusted gross proceeds to the issuer set forth in response to Part C - Question 4.b above adjusted gross proceeds to the issuer set forth in response to Part C - Question 4.b above adjusted gross proceeds to the issuer set forth in response to Part C - Question 4.b above adjusted gross proceeds to the issuer set forth in response to Part C - Question 4.b above adjusted gross proceeds to the issuer part C - Question 4.b above adjusted gross proceeds to the issuer pand equipment Construction or leasing of plant buildings and facilities Construction or leasing and installation of machinery and equipment Construction or leasing and installation of machinery and equipment Construction or leasing and installation of machinery and equipment Construction or leasing and installation of machinery and equipment Construction or leasing and installation of machinery and equipment Construction or leasing and installation of machinery and equipment Constructi	Salaries and fees	for each of the purposes shown. If the amount for any purpose is not known, furnish an nate and check the box to the left of the estimate. The total of the payments listed must equal adjusted gross proceeds to the issuer set forth in response to Part C - Question 4.b above. Payments to Officers, Directors, & Affiliates

-ATTENTION-

intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)